

<Prescription Drug Plan Template> DRAFT

Introduction to the Summary of Benefits for

<Plan Name>

January 1, 2006 - December 31, 2006

<Plan Geographic Name>

Thank you for your interest in <Plan Name>. Our plan is offered by <PDP Legal Name>, a Medicare Prescription Drug Plan. This Summary of Benefits tells you some features of our plan. It doesn't list every drug we cover, every limitation, or every exclusion. To get a complete list of our benefits, please call <Plan Name> and ask for the "Member Handbook."

YOU HAVE CHOICES IN YOUR MEDICARE PRESCRIPTION DRUG COVERAGE

As a person with Medicare, you have choices in how you get your Medicare prescription drug coverage. One option is to get prescription drug coverage through another Medicare Prescription Drug Plan. Another option is to get your Medicare prescription drug plan through a Medicare health plan (like a Medicare Advantage HMO or PPO). No matter what you decide, you are still getting your Medicare prescription drugs through the Medicare program.

You may join or leave a Medicare Prescription Drug Plan only at certain times. Call <Plan Name> at the telephone number listed at the end of this introduction or 1-800-MEDICARE (1-800-633-4227) for more information. TTY users should call 1-877-486-2048.

HOW CAN I COMPARE MY OPTIONS?

You can use this Summary of Benefits to compare <Plan Name> to other Medicare Prescription Drug Plans or other Medicare health plans. The charts in this booklet list some important drug benefits.

WHERE IS <Plan Name> AVAILABLE?

The service area for this plan includes: <County Name(s), State Abbreviation or Region>. You must live in one of these areas to join this plan. If you are in prison, you can't join this plan.

WHERE CAN I GET MY PRESCRIPTIONS IF I JOIN THIS PLAN?

<Plan Name> has formed a network of pharmacies. You can use any pharmacy in our network. The pharmacies in our network can change at any time. You can ask for a current Pharmacy Network List. Our number is listed at the end of this introduction.

WHAT HAPPENS IF I GO TO A PHARMACY THAT'S NOT IN YOUR NETWORK?

If you go to a pharmacy that's not in our network, you might have to pay more for your prescriptions. You also might have to follow special rules before getting your prescription in order for the prescription to be covered under our plan. For more information, call the telephone number at the end of this introduction.

DO YOU COVER MEDICARE PART A AND PART B DRUGS?

We don't cover drugs that are covered under Medicare Part A and Part B. We only cover drugs that are covered under the Medicare prescription drug plan.

Please call <PDP Marketing Name> for more information about this plan.

Visit us at <web site address>

or, call us:

Customer Service Hours:

Current members should call @PBP_A_CURMBR_PHONE (TTY/TDD
@PBP_A_TTYTDD_CURMBR_PHONE)

Prospective members should call @PBP_A_PROMBR_PHONE.
(TTY/TDD @PBP_A_TTYTDD_PROMBR_PHONE)

For more information about Medicare, call 1-800-MEDICARE (1-800-633-4227).
TTY users should call 1-877-486-2048. You can call 24 hours a day, 7 days a week.
Or, visit www.medicare.gov on the web.

If you have special needs, this document may be available in other formats.